

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		32	11/16
O.I.P.E. CLASSIFIER		920	11-26-01
FORMALITY REVIEW	MM	109	12-03-01
RESPONSE FORMALITY REVIEW	K		

# INDEX OF CLAIMS

BEST AVAILABLE COPY

- ✓ ..... Rejected
- = ..... Allowed
- (Through numeral)..... Canceled
- + ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected

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If more than 150 claims or 10 actions  
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858-30583  
12/26/01